NONPROFIT CORPORATION ANNUAL REPORT



FILE NOW: FILING FEE IS \$61.25

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT

1998

F97000000091 (5)

AMERICAN SOCIETY OF WOMEN ENTREPRENEURS, INC.

								AH is hir ab iri'		
Principal Place of Business Mailing Address						A LOUDING BASIN AMILY AMBLE		iii Adii Abiii	ABILL EBISE	ABABA ISBN ABBA
2121 PRECINCT LINE RD. HURST TX 78054		2121 PRECINCT LINE RD. HURST TX 76054				Date Incorporated or 0 01/06/1997	Jualified			
					4.	FEI Number 43-1498818				pplied For lot Applicable
⊢ '	Place of Business	2a. Mailing Address			5.	Certificate of Status De	sired		\$8.75	Additional
Suite, Apt.	# etc	Suite, Apt. #, etc.				Etastias Compalan Fin				equired
22		27			6.	6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
City & Star	le	City & State			7	7. Is this nonprofit corporation a homeowners association?				
23		28			'	Yes X No				
Zip Country		Zip Country			В.	8. This corporation owes or has paid the current year intangible				
24	25 29 30		30			Personal Property Tax due June 30. 🔲 Yes 📈 No				
	9. Name and Address of Curre	nt Registered Agent			10.	Name and Address o	New Reg	istered Ag	ent	
			81	Name						
CTCO	RPORATION SYSTEM		62	Street	Address (P	.O. Box Number is Not	Acceptable	e)		
1200 SC	DUTH PINE ISLAND ROAD									<u></u>
PLANTA	TION FL 33324		83	1						
			84	City				FL	85 Zip	Code
11. Pursuant	to the provisions of Sections 617.05	02 and 617,1508, Florida Statute	s, the abov	l e-named	corporation	submits this statemen	for the pu		nanging i	ts registered
office or i	to the provisions of Sections 617.05 registered agent, or both, in the State am familiar with, and accept the oblig	e of Florida. Such change was at	thorized b	y the cor	poration's b	oard of directors. I here	by accept	the appoin	itment as	registered
1	an tanınar with, and accept the oblig	jations bi, Section 617.0303, Fior	ida Siaigie	s. ·						
SIGNATURE	Signature, typed or printed name of registered ag	gent and title if applicable. (NOTE:	Registered Ap	ent signature	required when	reinstating)		DATE		
12.	OFFICERS AN	ND DIRECTORS	13.			ADDITIONS/CHANGES	TO OFFICE	RS AND D	PECTO	RS IN 12
TITLE	DP	DELETE	1.1 TITLE		DP					Addition
NAME	SMEDSRUD, JEFFREY	•	1.2 NAME		LOU AM	une king Jea	isen	•		
STREET ADDRESS	2121 PRECINCT LINE RD.			T ADDRESS		LEESBURG				
CITY-ST-ZIP	HURST TX 76054		1.4 CITY-			YVILLE, TX	76034			
TITLE	DV	DELETE	2.1 TITLE	-0				ĻX	Change	Addition
NAME	JENSEN, JEFFREY		2.2 NAME	2.2 NAME HIL		y smedsrud				
STREET ADDRESS		HIDOT THE TOOPS		2.3 STREET ADDRESS 60		IND ING CREE	K Cl.			
CITY-ST-ZIP	HURST TX 76054	NIA was	2.4 CITY-	ST-ZIP		HLAKE, TK	76092			
TITLE	OS .	DELETE	3.1 TITLE		70			ίΧ	Change	Addition
NAME	WILHITE, JANET		3.2 NAME			nne king Jei	ISEN			
STREET ADDRESS	2121 PRECINCT LINE RD.			ADDRESS		EESBURG	41 . 2 . 1			
CITY-ST-ZIP	HURST TX 76054	De Contract	3.4. CITY -	ST-ZIP	COLLE	YVILLE, TX	16034		Channa	1 Addition
TITLE	DT NOTICE LIEU	DELETE	4.1 TITLE					L	Change	Addition
NAME	WILLIAMS, HEIDI		4. 2 NAME							
STREET ADDRESS	2121 PRECINCT LINE RD.		4.3 STREET ADDRESS		•					
CITY-ST-ZIP	HURST TX 76054	☐ DELETE	4.4 CITY - ST - ZIP						Change	Addition
TITLE			5.1 TITLE					_	1 ministra	L. Automoti
NAME etpery appeared			5.2 NAME	ADDRESS						
STREET ADDRESS			5.3 STREET							
CITY-ST-ZIP TITLE		DELETE	5.4 CITY-5 6.1 TITLE	oi • LIF					Change	Addition
NAME :			6.2 NAME						,	
STREET ADDRESS			6.3 STREET	ADDRESS						
CITY-ST-ZIP			6.4 CITY - S							
1 OUT TO COLUMN			■ 0.4 OH11.5	11768						

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or on an attachment with an address.

SIGNATURE:

TOUR CLASSED BY LOOK ON THE CALL

2/18/98

817/428-4200

FILED

Feb 27 1998 8:00am

Secretary of State

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